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	REPORTS INVENTORY									CONTROL NO. DDS/OL/SD 40				
	PREPARE IN QUPLICATE									-6	XXXXX	XXX	STA	
	1. HILE OF REPORT (if a fill-in report include Form No.)								2. TYPE	X	SITUITAL	AL		
	Imprest Fund	Repo	rt (Form 1159 and	159 and Form 282)				OF REFORT		JARRATIVE			
			7						JACHINE-NA JE LISTING					
	3. FUNCTIONAL AREA X			PERSONNEL LOGISTICS		TRAINING SECURITY			ADHIN.					
	. 5. FUNCTIONAL AREA		^-	MEDICAL	X	X FINANCE			OTALA (speci	141		* -	
		4. NO. OF COPIES PREPARED								ON (1	o, of coup	onents	not	
	2 - Form 1159 4 - Form 282			Monthly					copie	s)				
	7. FORMAT (memore computer print	andum, t-out,	form etc)	YES IF YES	SIVE ADP I	ROCESSIN			E AUTHOR	HYR	EZUTRING R	EPOR T	STA	
	TO. PREPARING COTT	POHEHT	(incl	ude lovest level	11. F	EEDER REF	PORTS (State	total	number a	nd ide	entify by 1	Fitle,		
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	Office of D) i rec	tor :	Special Projec	ts	none	•			** •			•	
	12, COST FACTORS													
	A. MANUAL PREPARATION AND REVIEW COSTS													
,	GRADE	HOU RA		X HOURS PER 1	KEP		TIMES PREPARED	=		005	OST PER YEAR			
	GS-7	4.	93	4 .	19.	72	12		236.6	54				
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	B. COSTS OF COMPUTER PRODUCED REPORTS													
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	The second of th	***************************************		marrie & a necessaria de acama belgar perga a commune	TOTAL COSTS PER YEAR				\$236.64					
	13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or a													
	INCLUDE DATE IN	REPORT	WAS F	TRST STARTED AND CO	CINBNOdes SORI (IU i	MO ESTAB	to directive LISHED REQUIR	or aut EMENT.	hority c	ited	in item 9)	• 1F K	NO WN ,	
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